



Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	2876
Title::	CASH DISPENSING AUTOMATED BANKING MACHINE DIAGNOSTIC SYSTEM AND METHOD
Attorney Docket Number::	D-1220
Request for Early Publication?::	No
Request for Non-Publication?::	Yes
Suggested Drawing Figure::	1
Total Drawing Sheets::	32
Small Entity::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Steven
Middle Name::
Family Name:: Shepley
Name Suffix::
City of Residence:: Uniontown
State or Province Of Residence:: OH
Country of Residence:: US
Street of mailing address:: 4088 Meadow Wood Lane
City of mailing address:: Uniontown
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44685

Applicant Authority Type:: Inventor
Primary Citizenship Country:: IT
Status:: Full Capacity
Given Name:: Sergio
Middle Name::
Family Name:: Pellegrini
Name Suffix::
City of Residence:: Lessolo
State or Province Of Residence::
Country of Residence:: IT
Street of mailing address:: via Calea di sotto, 16
City of mailing address:: 10010 Lessolo (TO)
State or Province of mailing address:: OH
Country of mailing address:: IT
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: BR
Status:: Full Capacity
Given Name:: Marcelo
Middle Name::
Family Name:: Soares de Castro
Name Suffix::
City of Residence:: Sao Paulo
State or Province Of Residence::
Country of Residence:: BR
Street of mailing address:: Rua Gal. Chagas Santos, 197, Ap. 31, Saude
City of mailing address:: Sao Paulo
State or Province of mailing address::
Country of mailing address:: BR
Postal or Zip Code of mailing address:: 04146-050

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Glenda
Middle Name::
Family Name:: Griswold
Name Suffix::
City of Residence:: North Canton
State or Province Of Residence:: OH
Country of Residence:: US
Street of mailing address:: 2673 St. Albans Circle, N.W.
City of mailing address:: North Canton
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44720

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Aarthi
Middle Name::
Family Name:: Rao
Name Suffix::
City of Residence:: Akron
State or Province Of Residence:: OH
Country of Residence:: US
Street of mailing address:: 915 Mull Avenue, Apt. PH-18
City of mailing address:: Akron
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44313

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Kristin
Middle Name::
Family Name:: Stewart
Name Suffix::
City of Residence:: Canton
State or Province Of Residence:: OH
Country of Residence:: US
Street of mailing address:: 6722 Stream Avenue N.E.
City of mailing address:: Canton
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44721

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Deborah
Middle Name::
Family Name:: Arney
Name Suffix::
City of Residence:: Massillon
State or Province Of Residence:: OH
Country of Residence:: US
Street of mailing address:: 2480 Meadowside N.W.
City of mailing address:: Massillon
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44646

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: James
Middle Name::
Family Name:: Block
Name Suffix::
City of Residence:: N. Lawrence
State or Province Of Residence:: OH
Country of Residence:: US
Street of mailing address:: 5871 Alabama Ave. NW
City of mailing address:: N. Lawrence
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 44666

Correspondence Information

Correspondence Customer Number:: 28995

Representative Information

Representative Customer Number::	28995
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	09/863,911	05/23/2001
09/863,911	An application claiming the benefit under 35 USC 119(e)	60/207,043	05/25/2000
This Application	An application claiming the benefit under 35 USC 119(e)	60/429,249	11/25/2002
This Application	An application claiming the benefit under 35 USC 119(e)	60/429,250	11/25/2002
This Application	An application claiming the benefit under 35 USC 119(e)	60/429,476	11/26/2002
This Application	An application claiming the benefit under 35 USC 119(e)	60/429,521	11/26/2002

This Application	An application claiming the benefit under 35 USC 119(e)	60/429,528	11/26/2002
This Application	An application claiming the benefit under 35 USC 119(e)	60/453,370	3/10/2003
This Application	An application claiming the benefit under 35 USC 119(e)	60/465,733	04/25/2003

Assignee Information

Assignee Name::

Diebold Self-Service Systems

Division of Diebold, Incorporated

City of mailing address::

North Canton

State or Province of mailing address::

OH